

<b>DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION</b>	
<input type="checkbox"/> Declaration <input checked="" type="checkbox"/> Declaration	
Submitted with Initial Filing	Submitted after Initial Filing (surcharge 37 CFR 1.16(e) required)

Attorney Docket No.	RFS-001CP
First Named Inventor	Lieblich
<b>COMPLETE IF KNOWN</b>	
Application Serial Number	10/626,394
Filing Date	July 24, 2003
Group Art Unit	Not yet assigned
Examiner Name	Not yet assigned

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DISTRIBUTED COMPUTER MONITORING SYSTEM AND  
METHODS FOR AUTONOMOUS COMPUTER MANAGEMENT

*(Title of the Invention)*

the specification of which

is attached hereto

OR

was filed on 07/24/2003 as United States Application Serial Number or PCT International  
(MM/DD/YYYY)

Application Number 10/626,394 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the Patent Office all information known by me to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information known by me which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, or inventor's certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, or inventor's certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Serial Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application serial numbers are listed on a supplemental priority data sheet attached hereto.

## Declaration and Power of Attorney for Utility or Design Patent Application

Serial No.: Not yet assigned

Atty. Docket No.: RFS-001CP

Page 2 of 3

**DECLARATION – Utility or Design Patent Application**

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c), of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Serial Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
10/618,092	07/11/2003	

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioners to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:  Customer Number   → Place Customer Number Bar Code Label Here

OR

Registered practitioner(s) name/registration number listed below

	Registration Number	Name	Registration Number
Andrew F. Abramson	52,538	William R. Haulbrook	53,002
Steven M. Bauer	31,481	Ira V. Heffan	41,059
Mark L. Beloborodov	50,773	Douglas J. Kline	35,574
John V. Bianco	36,748	William A. Meunier	41,193
Robert S. Blasi	50,389	Thomas C. Meyers	36,989
Michael H. Brodowski	41,640	Ronda P. Moore	44,244
Jennifer A. Camacho	43,526	Jeremy P. Oczek	50,794
Joseph A. Capraro, Jr.	36,471	Jamie H. Rose	45,054
Fangli Chen	51,551	Christopher W. Stamos	35,370
Christopher H. Chung	50,351	Diana M. Steel	43,153
John J. Cotter	38,116	Robert J. Tosti	35,393
Robert V. Donahoe	46,667	Thomas A. Turano	35,722
Brian A. Fairchild	48,645	Natasha C. Us	44,381
James E. Fajkowski	54,089	Christine C. Vito	39,061
Jason P. Fiorillo	52,892	Daniel A. Wilson	45,508
John V. Forcier	42,545	Gerald E. Worth	45,238
Steven J. Frank	33,497	Yin P. Zhang	44,372
Kia L. Freeman	47,577	Stephanie M. Zierten	52,397
Brian M. Gaff	44,691		
Edward A. Gordon	P-54,130		
Jennifer Grant Moisoto	51,752		
Duncan A. Greenhalgh	38,678		

Additional registered practitioners named on supplemental Registered Practitioner Information sheet attached hereto.

Direct all correspondence to:

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 Testa, Hurwitz & Thibeault, LLP  
 High Street Tower  
 125 High Street  
 Boston, MA 02110  
 Tel. No.: (617) 248-7000  
 Fax No.: (617) 248-7100

## Declaration and Power of Attorney for Utility or Design Patent Application

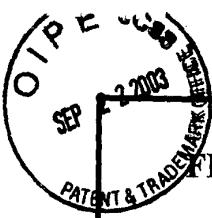
Serial No.: Not yet assigned

Atty. Docket No.: RFS-001CP

Page 3 of 3

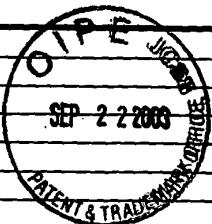
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

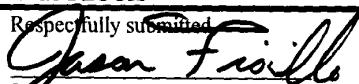
Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])				Family Name or Surname				
Jason				Lieblich				
Inventor's Signature							Date	
Residence	City	Hollis	State	NH	Country	USA	Citizenship	USA
Mailing Address	242 Federal Hill Road							
Mailing Address (ln. 2)	City	Hollis	State	NH	ZIP	03049	Country	USA
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) attached hereto.								
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])				Family Name or Surname				
Dustin				Norman				
Inventor's Signature							Date	
Residence	City	Nashua	State	NH	Country	USA	Citizenship	USA
Mailing Address	6B High Pine Avenue							
Mailing Address (ln. 2)	City	Nashua	State	NH	ZIP	03063	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])				Family Name or Surname				
Inventor's Signature							Date	
Residence	City		State		Country		Citizenship	
Mailing Address								
Mailing Address (ln. 2)	City		State		ZIP		Country	



**FEES TRANSMITTAL  
FY 2003**

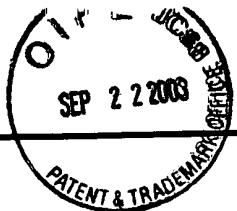
Complete if Known	
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Filing Date	July 24, 2003
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METHOD OF PAYMENT		FEE CALCULATION (continued)																																																																																																							
1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other		3. ADDITIONAL FEES Large Entity      Small Entity Fee (\$)      Fee (\$)      Fee Description      Fee Paid																																																																																																							
2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit.		130      65      Surcharge - late filing fee or oath      \$ 65.00 50      25      Surcharge - late provisional filing fee or cover sheet 130      130      Non-English specification 2,520      2,520      Request for ex parte reexamination 110      55      Extension for reply within first month 410      205      Extension for reply within second month 930      465      Extension for reply within third month 1450      725      Extension for reply within fourth month 1970      985      Extension for reply within fifth month 320      160      Notice of Appeal 320      160      Filing a brief in support of an appeal 280      140      Request for oral hearing 130      130      Petitions to the Commissioner 180      180      Submission of Information Disclosure Statement 750      375      Filing a submission after final rejection (37 CFR 1.129(a)) 750      375      For each additional invention to be examined (37 CFR 1.129(b)) 100      100      Certificate of Correction for applicant's error 110      55      Submission of Terminal Disclaimer  Other fee (Specify) _____ Other fee (Specify) _____																																																																																																							
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1. FILING FEE <table border="1"> <thead> <tr> <th colspan="2">Large Entity</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee (\$)</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr> <td>750</td> <td>Utility filing fee</td> <td></td> </tr> <tr> <td>330</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>160</td> <td>Provisional filing fee</td> <td></td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th>Number Filed</th> <th>Number Extra</th> <th>Rate</th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>- 20 =</td> <td>x \$ 18.00 =</td> <td></td> </tr> <tr> <td>Independent Claims</td> <td>- 3 =</td> <td>x \$ 84.00 =</td> <td></td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Multiple Dependent Claim(s), if any</td> <td>\$280.00 =</td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL:</td> </tr> <tr> <td colspan="4" style="text-align: right;">SMALL ENTITY DISCOUNT:</td> </tr> <tr> <td colspan="2" style="text-align: right;">SUBTOTAL (1)</td> <td colspan="2" style="text-align: right;">(\$ 0</td> </tr> </tbody> </table> 2. AMENDMENT CLAIM FEES <table border="1"> <thead> <tr> <th>Claims Remaining After Amend.</th> <th>Highest No. Previously Paid For</th> <th>Present Extra</th> <th>Rate</th> <th>Fee Paid</th> <th style="text-align: right;">SUBTOTAL (3) (\$ 65.00</th> </tr> </thead> <tbody> <tr> <td>Total</td> <td>- =</td> <td></td> <td>x \$ 18.00 =</td> <td></td> <td></td> </tr> <tr> <td>Indep.</td> <td>- =</td> <td></td> <td>x \$ 84.00 =</td> <td></td> <td></td> </tr> <tr> <td colspan="2"><input type="checkbox"/> First Presentation of Multiple Dep. Claim</td> <td></td> <td>+\$ 280.00 =</td> <td></td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL:</td> <td colspan="2" style="text-align: right;">(\$ 0</td> </tr> <tr> <td colspan="4" style="text-align: right;">SMALL ENTITY DISCOUNT:</td> <td colspan="2" style="text-align: right;">(\$ 0</td> </tr> <tr> <td colspan="2" style="text-align: right;">SUBTOTAL (2)</td> <td colspan="2" style="text-align: right;">(\$ 0</td> <td colspan="2" style="text-align: right;">SUBTOTAL (1) 0</td> </tr> <tr> <td colspan="2" style="text-align: right;">SUBTOTAL (2)</td> <td colspan="2" style="text-align: right;">(\$ 0</td> <td colspan="2" style="text-align: right;">SUBTOTAL (2) 0</td> </tr> <tr> <td colspan="2" style="text-align: right;">SUBTOTAL (2)</td> <td colspan="2" style="text-align: right;">(\$ 0</td> <td colspan="2" style="text-align: right;">SUBTOTAL (3) \$ 65.00</td> </tr> <tr> <td colspan="6" style="text-align: right;">TOTAL (\$ 65.00</td> </tr> </tbody> </table> CORRESPONDENCE ADDRESS				Large Entity		Fee Paid	Fee (\$)	Fee Description	750	Utility filing fee		330	Design filing fee		160	Provisional filing fee		Number Filed	Number Extra	Rate	Amount	Total Claims	- 20 =	x \$ 18.00 =		Independent Claims	- 3 =	x \$ 84.00 =		<input type="checkbox"/> Multiple Dependent Claim(s), if any		\$280.00 =		TOTAL:				SMALL ENTITY DISCOUNT:				SUBTOTAL (1)		(\$ 0		Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid	SUBTOTAL (3) (\$ 65.00	Total	- =		x \$ 18.00 =			Indep.	- =		x \$ 84.00 =			<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+\$ 280.00 =			TOTAL:				(\$ 0		SMALL ENTITY DISCOUNT:				(\$ 0		SUBTOTAL (2)		(\$ 0		SUBTOTAL (1) 0		SUBTOTAL (2)		(\$ 0		SUBTOTAL (2) 0		SUBTOTAL (2)		(\$ 0		SUBTOTAL (3) \$ 65.00		TOTAL (\$ 65.00					
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Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibeault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100		SIGNATURE BLOCK Respectfully submitted  Jason P. Fiorillo Attorney for the Applicants Testa, Hurwitz & Thibeault, LLP High Street Tower-125 High Street Boston, MA 02110																																																																																																							

2685527

09/24/2003 EREGY1 00000108 10656394  
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# TRANSMITTAL FORM

Application Serial Number	10/626,394
Filing Date	July 24, 2003
First Named Inventor	Lieblich
Group Art Unit	Not yet assigned
Examiner Name	Not yet assigned
Attorney Docket No.	RFS-001CP
Patent No.	Not applicable
Issue Date	Not applicable

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Check Attached</li> <li><input type="checkbox"/> Copy of Fee Transmittal Form</li> </ul>	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application  <input type="checkbox"/> Formal Drawing(s)  <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal  <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)  <input type="checkbox"/> Terminal Disclaimer  <input checked="" type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application  <input type="checkbox"/> Small Entity Statement  <input type="checkbox"/> CD(s) for large table or computer program  <input type="checkbox"/> Amendment After Allowance  <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences  <input type="checkbox"/> Appeal Brief (in triplicate)  <input type="checkbox"/> Status Inquiry  <input checked="" type="checkbox"/> Return Receipt Postcard  <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8  <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8  <input type="checkbox"/> Additional Enclosure(s) (please identify below)
<input type="checkbox"/> Amendment/Response <ul style="list-style-type: none"> <li><input type="checkbox"/> Preliminary</li> <li><input type="checkbox"/> After Final</li> <li><input type="checkbox"/> Affidavits/declaration(s)</li> <li><input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____]</li> </ul>		
<input type="checkbox"/> Petition for Extension of Time	<input checked="" type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application	
<input type="checkbox"/> Information Disclosure Statement <ul style="list-style-type: none"> <li><input type="checkbox"/> Form PTO-1449</li> <li><input type="checkbox"/> Copies of IDS Citations</li> </ul>	<input type="checkbox"/> Small Entity Statement  <input type="checkbox"/> CD(s) for large table or computer program  <input type="checkbox"/> Amendment After Allowance  <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Sequence Listing submission <ul style="list-style-type: none"> <li><input type="checkbox"/> Paper Copy/CD</li> <li><input type="checkbox"/> Computer Readable Copy</li> <li><input type="checkbox"/> Statement verifying identity of above</li> </ul>		

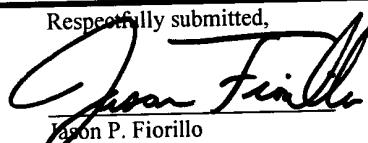
## CORRESPONDENCE ADDRESS

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 High Street Tower  
 125 High Street  
 Boston, MA 02110  
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## SIGNATURE BLOCK

Date: September 19, 2003  
 Reg. No.: 52,892  
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Respectfully submitted,

  
 Jason P. Fiorillo  
 Attorney for Applicants  
 Testa, Hurwitz & Thibeault, LLP  
 High Street Tower  
 125 High Street  
 Boston, MA 02110



**PATENT**  
Attorney Docket No.: RFS-001CP  
(9521/4)

*\$J*

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

APPLICANTS: Lieblich *et al.*  
SERIAL NO.: 10/626,394 GROUP NO.: Not yet assigned  
FILING DATE: July 24, 2003 EXAMINER: Not yet assigned  
TITLE: Distributed Computer Monitoring System and Methods for Autonomous Computer Management

**CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8**

I hereby certify that this correspondence, and any documents referred to as enclosed herein, are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 19<sup>th</sup> day of September, 2003.

Nicole Deane

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Submitted herewith are:

- 1.) Transmittal Form (1 pg.);
- 2.) Executed Declaration and Power of Attorney for Utility or Design Patent Application (3 pgs.);
- 3.) Fee Transmittal (1 pg.);
- 4.) Check in the amount of \$65.00; and
- 5.) Return Receipt Postcard.